

STRUCTURED SETTLEMENT APPLICATION

The following information needs **to be completed in full and signed** by you.

I. Personal Information

Applicant's Name: _____
(first) (middle) (last)

Aliases (such as Maiden Name, etc): _____

Home Phone: (_____) _____ - _____ Work Phone: (_____) _____ - _____

Cell Phone: (_____) _____ - _____ Other Phone: (_____) _____ - _____

E-Mail Address: _____@_____

Your Current Address

(street address) (apt #)

(city) (state) (zip)

What county do you reside in? _____

How long have you lived at your current address? _____

If less than 5 years at address above, list all prior addresses for the past five (5) years and length of time at each:

Address: _____
(street) (city) (state) (zip) (length of time in yrs/mos)

Address: _____
(street) (city) (state) (zip) (length of time in yrs/mos)

Address: _____
(street) (city) (state) (zip) (length of time in yrs/mos)

Date of Birth: ____/____/____ Social Security Number: ____ - ____ - ____

Marital Status (circle only one box): Single Divorced Separated Married Widowed

If Married, Spouse's Name: _____ Date of Marriage: ____/____/____
(first) (middle) (last)

Have you ever been divorced? Yes No If you answered yes, in what year(s) were you divorced _____

****You must provide a copy of your divorce decree and any related documents (i.e. Property/Marital Settlement Agreements)****

How many dependents/children do you have? _____

Name: _____ Date of Birth: _____ Relationship: _____

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Nearest Relative who does not reside with you:

Name: _____ Phone Number: _____

Current Address: _____

(Street)

(Apt)

(City)

(State)

(Zip)

Personal, non-family references

1. _____
(Name) (Address) (City) (State) (Zip) (Phone)

2. _____
(Name) (Address) (City) (State) (Zip) (Phone)

Do you have any obligation to pay child support? Yes No

If you answered yes, please provide information regarding your child support

- such as how much your obligation is each month, a case number, if any, the individual/entity to who you pay the child support to and whether you are paid up to date or are in arrears.

Do you have any obligations to pay alimony or any other form of spousal support? Yes No

If you answered, yes, please provide information regarding your obligation

- such as how much your obligation is each month, a case number, if any, the individual/entity to whom you the support to and whether you are paid up to date or are in arrears:

Do you have any tax liens or outstanding judgments? Yes No

If you answered yes, please provide as much information as possible regarding the lien(s)

- such as year the lien(s) was filed, who filed the lien(s), the amount of lien(s):

Have your settlement payments ever been garnished? Yes No

If you answered yes, please provide as much information as possible regarding the garnishment:

Have you ever filed for bankruptcy? Yes No

If you answered yes, please complete the following:

Year of bankruptcy _____ State Filed _____ Year dismissed or discharged? _____

****You must provide a copy of your bankruptcy petition (or your bankruptcy attorney's name and phone number) and the discharge or dismissal, if applicable. You may also be asked to provide a copy of your bankruptcy petition****

II. Employment:

Are you currently employed? Yes No

Your Occupation: _____

Your Employer's Name: _____

Your Annual Salary: \$_____ How long have you been employed? _____

If you are not employed when was the last time you were employed, and where? _____

If married, is your spouse currently employed? Yes No Spouse's Occupation _____

Spouse's Annual Salary \$_____.

Do you have any other income? Yes No

If yes, what is the source and the amount? _____

III. Settlement and Annuity Information

Is your settlement a result of Workman's Compensation? Yes No

Insurance company issuing structured settlement payments? _____

Annuity policy number issued by the company listed above (also on your check stub)? _____

Are the annuity payments made payable to anyone other than you? _____

To your knowledge, who is the beneficiary (ies) for your settlement payments in the event of your death?

What was the name of the attorney who represented you in your original settlement?

Name _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

Where did you original settlement take place? _____ What year? _____

Please provide information regarding the incident and the extent of your injuries that caused the structured settlement to be created:

Please describe in detail the reason for selling your annuity payments for a lump sum. (Please be specific, i.e. exact amount of bills, tuition, purchases, etc., name of school, major, accepted, etc.)

Have you ever sold or assigned any of your structured settlement payments?

If you answered yes, please explain the transaction(s) you completed (including who you sold payments to, when you completed your prior transaction(s), how much you sold and how much you received for those payments?):

I CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT.

By executing this application, I hereby authorize Mainstreet Funding, its assigns or agents to conduct any credit, criminal, judgment and lien searches necessary to process this application.

Applicant's Signature: _____

Date: _____